

 <p><b>Fayette County</b>  <b>Permits &amp; Inspections Department</b>  140 Stonewall Avenue West • Suite 201 • Fayetteville, GA 30214  Phone: 770-460-5730, x5403 Fax 770-460-8663  Web: <a href="http://www.fayettecountyga.gov/bldg_permits/infobldg.asp">http://www.fayettecountyga.gov/bldg_permits/infobldg.asp</a></p> <p><b>SUPPLEMENTAL APPLICATION FOR MANUFACTURED HOMES</b></p>	<b>FOR DEPARTMENTAL USE ONLY</b>	
	PERMIT NO.:	
	RECEIVED BY / DATE:	
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REVISED: 12/31/06		

**FOR USE IN CONJUNCTION WITH THE PERMIT APPLICATION**

**PERMIT APPLICATIONS, PLANS AND/OR SUPPORTING DOCUMENTATION THAT ARE INCOMPLETE, ILLEGIBLE OR SUBMITTED IN ERASABLE MEDIA WILL NOT BE ACCEPTED. TYPE OR PRINT CLEARLY USING PERMANENT BLUE OR BLACK INK.**

<b>1. PARCEL/PARK OWNER'S INFORMATION:</b>		
<input type="checkbox"/> CHECK IF SAME AS OWNER'S INFORMATION ON PERMIT APPLICATION (PROCEED TO SECTION 2).		
NAME:		
ADDRESS:		
CITY:	STATE:	ZIP CODE:
DAY PHONE NO.:	CELL NO.:	
FAX NO.:	EMAIL:	
<b>2. MANUFACTURED HOME DEALER'S / SELLER'S INFORMATION:</b>		
NAME:	TITLE (DEALER, SELLER, ETC.):	
ADDRESS:		
CITY:	STATE:	ZIP CODE:
DAY PHONE NO.:	CELL NO.:	
FAX NO.:	EMAIL:	
<b>3. MANUFACTURED HOME INSTALLER'S INFORMATION:</b>		
NAME:	TITLE (INSTALLER, QUALIFIED EMPLOYEE, ETC.):	
BUSINESS NAME:	BUSINESS LIC. NO.:	
STATE OF GEORGIA REGISTRATION OR LIC. NO. (PROVIDE COPY OF CERTIFICATE):		
ADDRESS:		
CITY:	STATE:	ZIP CODE:
DAY PHONE NO.:	CELL NO.:	
FAX NO.:	EMAIL:	
<b>4. MANUFACTURED HOME INFORMATION:</b>		
LENGTH:	NO. OF BEDROOMS:	<input type="checkbox"/> NEW –OR– <input type="checkbox"/> USED
WIDTH:	NO. OF BATHROOMS:	YEAR MANUFACTURED:

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE (INSTALLER, OWNER, ETC.)